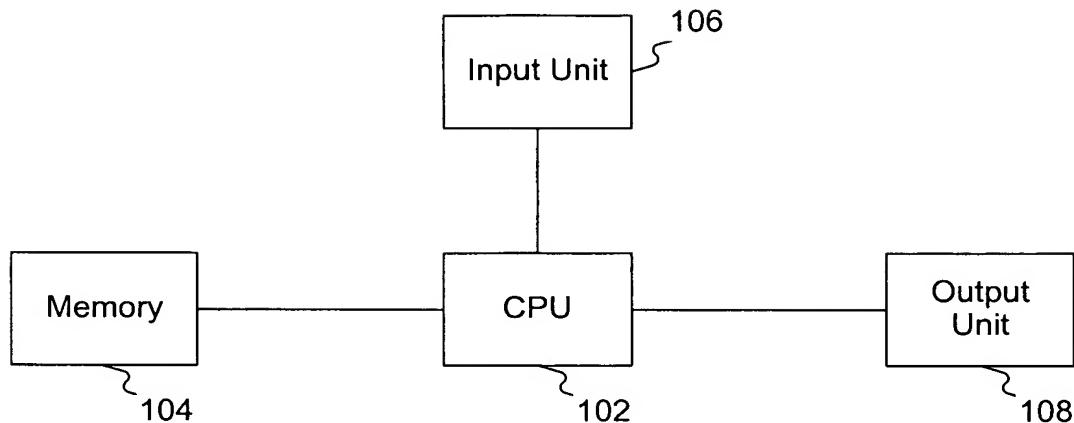
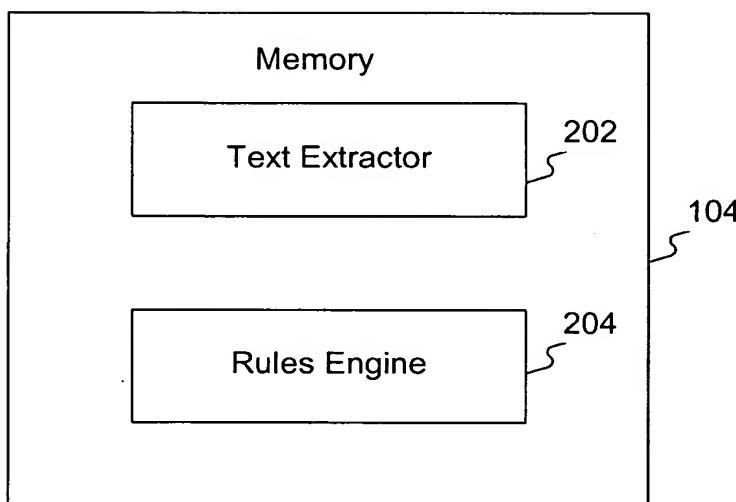


## **FIGURE 1**

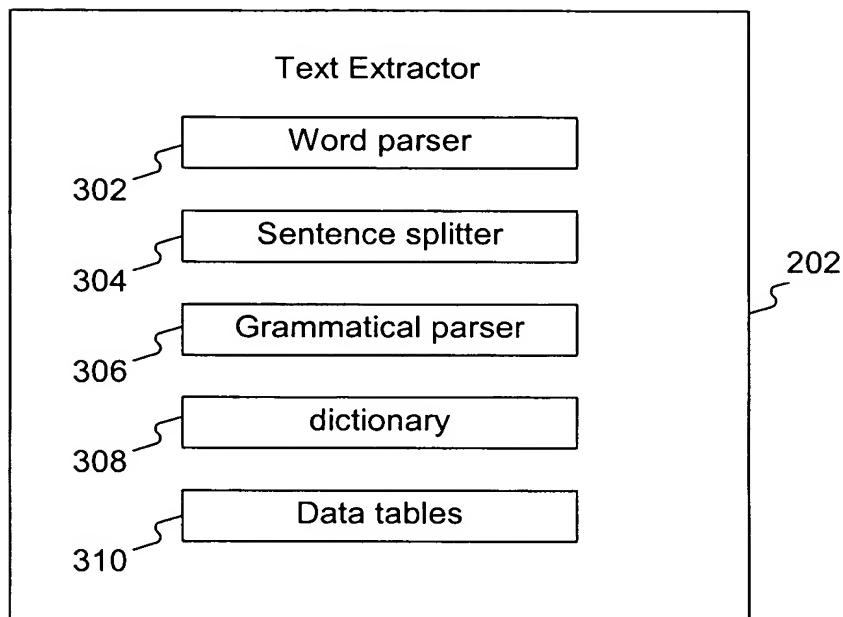
100



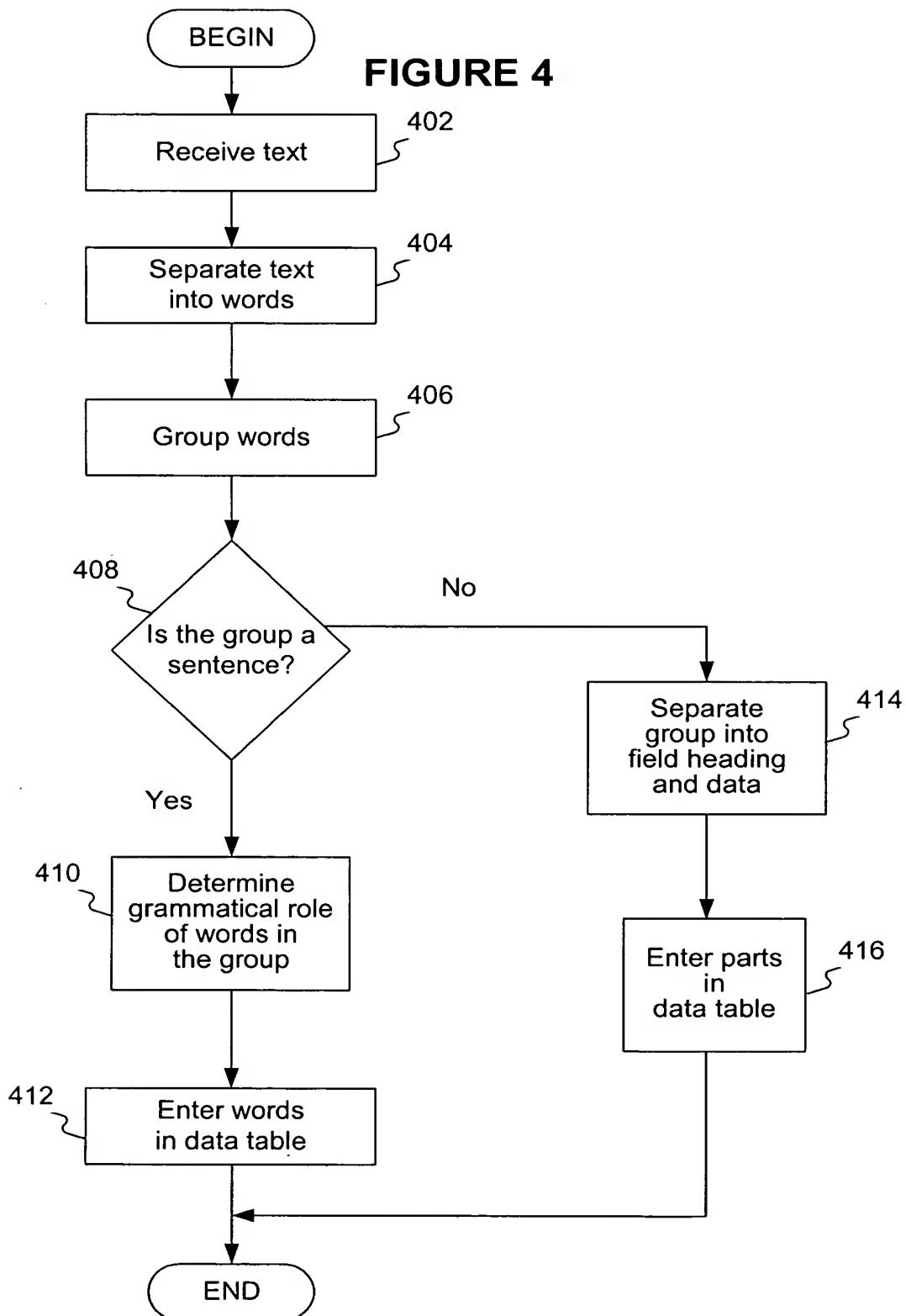
## **FIGURE 2**



## **FIGURE 3**



**FIGURE 4**



## FIGURE 5

500

Subject	Verb	Object
O.V.	Struck	I.V.

## FIGURE 6

600

Data Entry Field Heading	Entry
Loss state	New Jersey
Payment type	Collision

**FIGURE 7**

